



The Body
250 West 57th Street
Suite 415
New York, NY 10107-0415

## $\frac{T H E}{B O D Y}$ Physician Researcher Registration

Your leadership in HIV/AIDS and your interest in *The Body* have encouraged us to reach out to you in advance of the general launch of the clinician-specific clinical trials area, to give you an early opportunity to participate.

Please take a moment to fill out this card so that we may be able to include you in future research projects.

Name:	m.n.	<b>a</b>
Name of Practic Contact Person:		
Street Address:	140m	
City: Sjáte: Zip:		
Telephone: Email Address: AAAA	0/4	
About how many HIV patients do you treat?		o e e
About how many treatment naïve patients do you start on treatment a year	20	
Do you employ or have access to clinical research staff or research nurse?	Yes	No
Can you use a central IRB?	Yes	(No)
Does your office/staff have access to the Internet?	Yes	No
Do you have clinical research experience? If yes,	Yes	No
How many years of experience?		
Approximately how many studies?		

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Name: MD, Ph.D.		-
MEDICAL ASSOCIATES,		, LPN.CRC
Street Additess:  MIAMI, FLA 3313	3	,, 4,
City: State 7. 7 in		
Telephone: Email Address:		
About how many HIV patients do you treat?		
About how many treatment naïve patients do you start on treatment a year?	Several	dozen
Do you employ or have access to clinical research staff or research nurse?	Yes	No
Can you use a central IRB?	Yes	No
Does your office/staff have access to the Internet?	Yes	No
Do you have clinical research experience?	Yes	No
If yes,  How many years of experience?		